

This presentation was provided as a Webinar for Health Home Care Coordinators which aired on November 14, 2013. Review of this PowerPoint presentation satisfies, in part, the required State-sponsored special training modules for Health Home Care Coordinators.

The focus of this PowerPoint presentation is on outreach strategies for improving engagement.

Outreach Strategies adapted in part from

Hints on Engagement

Center for Health Care Strategies
Rethinking Care Webinar

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We would like to acknowledge Monica Stanley from our Research and Analysis Division. Some of the information from her Webinar which aired on October 5, 2010 has been incorporated in to today's presentation.



Representatives from the Department of Social and Health Services and the Health Care Authority have heard from various agencies that some Care Coordinators are experiencing challenges in completing your outreach and engagement with some clients. This PowerPoint was developed in response to these challenges and provides some options and ideas that may be helpful in locating your clients.

Learning Objectives

- Provide strategies for locating clients
- Preview techniques for recruiting clients
- Offer techniques for increasing client engagement during the first contact







First let us consider some strategies for locating clients. These are suggestions and as a Care Coordinator you are not required to implement the methods for locating and contacting your client. Some of the suggestions include costs and you are not required to implement these ideas.

- Use existing sources of data within your own agency
 - Area Agencies on Aging may use data from the CARE or TCARE programs, SSPS, and Respite Programs
 - Multi-service centers or medical clinics may have client contact information in other departments
 - Billing departments may have contact information



Billing departments in multiservice centers may have the most current address and telephone information. They may also have the name and contact number of a guarantor on the client's account. You could contact emergency contacts listed in the client's health record. Contacting a pharmacy identified in PRISM can provide another avenue for locating clients.

- The Department of Social and Health Services (DSHS) financial services specialists may have more up-to-date information on the client's address and/or phone number
 - Inquire about contact information
 - Is there a representative, payee, or guardian listed in ACES
 - Be prepared to describe Health Homes to the financial services worker
 - Contact Medicaid at: 1-877-501-2233



Consider contacting the financial services specialist either in the local Community Service Office (CSO) or Home and Community Services office. Staff may not be aware of this new Medicaid benefit that you are providing so be prepared to explain the program. Let them know that you are an agent of the Medicaid program and that the Health Care Authority and DSHS have referred the client to you for care coordination. It may be helpful to inform them that the goal of care coordination is to reduce Medicaid expenditures and that you need their help in locating and contacting your mutual clients.

- The DSHS financial service specialist may have other collateral information in the documents contained in the electronic case record
 - Inquire about rent verifications: does it include contact information for the landlord
 - Do bank statements contain the same or a different address for the client



Ask the financial services worker if there may be documents scanned in to the electronic case record that may contain contact information for the client or other collaterals.

- The DSHS social service specialist or community nurse consultant may have information in CARE
 - Ask for current address and telephone
 - Inquire about collaterals including family, friends, guardians, and payees
 - Ask if SSPS can identify current or previous providers



Social services specialists and nurses may not be familiar with the program so you may need to describe your role. Training will be offered in early 2014 but case managers may still need you to clarify your role and purpose in working with your mutual clients. Explain that you are an agent of the Health Care Authority and DSHS and have permission to request this confidential information.

Residential providers, such as adult family home providers, may be helpful in locating your client.

- Contact community service officers in your local police department
- Contact local emergency departments if the client is known to frequent the hospital
- Contact discharge departments to alert that you are attempting to locate the client
- · Contact local jails, especially jail health



If your city has a community service officer program your client may be well known to law enforcement.

This should not be done without a signed Information Sharing Consent form or the client's verbal approval. This may be a method for locating a client already enrolled in Health Homes when you have lost contact with your client.

For clients that you have been working with, and with written consent, you may want to contact local emergency departments and ask them to contact you when the client shows up.

Locating Clients: Online Research

- Web sites to consider:
 - Facebook
 - -411.com
 - 123people.com
 - Google or Bing
 - PeopleFinder.com
 - Enter last known address to locate the name of the last landlord or apartment complex



There are a number of search engines for locating people. Some of these sites charge a fee and DSHS is not requiring that you purchase them. Some are free and will provide the names of relatives which may help you in locating your client.

411.Com allows you to search by phone number, reverse number by address, the White Pages, the Yellow Pages, area codes and zip codes.

123people.com is a search engine that will search for any information available publicly on the Web.

Locating Clients: Online Resources

- Additional Web sites:
 - Metronet Experian
 - Employers
 - Online Yellow Pages
 - Court documents
 - PublicRecordsOfficial.com
 - Corrections Web sites:
 - · Washington State Dept. of Corrections
 - · County and city jails



Metronet Experian is a credit reporting agency and may have current addresses for your client.

Public Records Official is a nationwide search engine for court actions.

Corrections, jail, and court Web sites may also provide information about your client. It can help you determine if the client is in jail so they will not be reachable at their residence.

Locating the Client

- When calling the client don't give up
- Try different days of the week and different times of the day



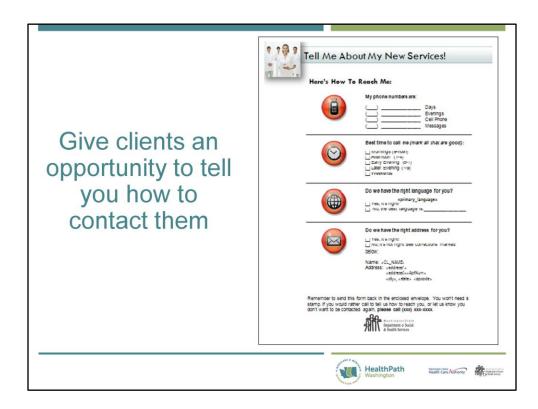
 Don't wait to start your outreach: clients may move within a day



Call clients as soon as possible after your receive the referral as a number of these clients move frequently, especially if they do not have stable housing. We realize that reaching clients can be difficult and we encourage you to keep trying. Perhaps a client's cell phone service has been turned off. Continue to call in case service is restored.



As we said in the Two-Day Basic Training, either the Health Care Authority or your lead organization will send out an introduction letter with a brochure about the program.



You may want to send your own letter to the client with your contact information. Be aware of literacy level and aim for a reading comprehension level of grade 6 or lower.

This is a sample of a letter used by DSHS to solicit information about when and how to best reach the client.

Use a colored envelope or graphic to catch their eye. Hand write the address, preferably in a unique color such as green or purple.

Include a pre-posted return envelope to increase your chances that the client will mail it back.

Indicate that the information is needed within two weeks and include a date. After two weeks most people will forget and not respond.

Tips for Success

- Use a common logo or theme on all letters and forms
- Send a second letter
- Consider using a handwritten note to personalize the letter
- Provide call back numbers and locate in a prominent place on the correspondence
- Mail letters on Tuesday
- Make a follow up call 4-7 days after mailing any correspondence



Mail letters on Tuesday so they are not included with higher volume mail on Monday that has accumulated from the weekend. If the letter arrives during the week you have a better chance of them responding during business days.



Following are some suggestions on how to work with your client once you have made initial contact. While these ideas are not new, they are simple and effective and could help you in engaging your client.

First Contact

- ✓ If you reach someone other than the client ask probing questions to find out the most recent contact information and best methods and times for reaching the client. Leave your contact information.
- ✓ Be aware of confidentiality



Try to avoid sounding as if you are from a collections agency or a telephone solicitor by being too aggressive or persistent. Be transparent – you are a representative from Medicaid or your lead entity and are contacting recipients to tell them about this new free benefit available from their health care insurance.

If you do not reach the client and are speaking to someone else be aware of confidentiality.

First Contact

- ✓ Consider offering an incentive
 - ✓ "We have a \$10 gift card for them."
 - ✓ Leave a phone number that will be answered when you are not available



Collaterals may be more willing to pass on your name and number if it may benefit the client. We are not requiring that you offer gift cards, this is just one strategy that may increase the likelihood that your client will return your call.



By using your first contact as a time to ask questions and listen to the client you may increase your chances for the client to agree to schedule follow-up phone calls and perhaps a face-to-face visit.

Goals for Engagement

- 1. Meet the client
- 2. Introduce yourself



- 3. Identify how they prefer to receive information
- 4. Identify who helps them make decisions
- 5. Encourage the client to accept or consider accepting Health Home Services



Be aware of the client's ability to hear and see. Adapt your outreach based on their needs. Ask them if they prefer telephone calls or want information in writing. Ask the client if there is someone who helps them manage their affairs. Ask them if you may contact this person.

Reviewing PRISM data may provide some areas that you can use to initiate discussion and increase their interest in the program. PRISM can provide information on the client's primary language and special needs to be aware of when contacting the client.

- 1. Briefly state the purpose of the call and shift the conversation to their needs
 - Clients may be more likely to participate if they sense your interest in them and their needs
 - Use a reference they may trust
 - Do you work with case managers or another professional where they receive services?
 - Ask them if they received the brochure from HCA or lead entity



Check PRISM data prior to contacting the client to identify providers that you may be associated with and explain your relationship to them and how you can work together. Use this as an opportunity to receive verbal permission to contact them and follow up with the Information Sharing Consent form. Document the client's verbal approval for you to contact collaterals and providers in the electronic case record.

- 2. Avoid the use of acronyms and use simple language to communicate
 - Use words that contain fewer than three syllables when possible
 - Avoid jargon and slang
 - Consider that clients may have hearing impairment, has limited English proficiency, or may be distracted
 - Take notes to share with the care coordinator if you are calling on their behalf:
 - Information which may appear unimportant may provide insight for the care coordinator







Whether you are communicating in writing or through phone calls consider the following tips.

- 3. Show respect for their time and understanding
 - Check with the client to see if this is a good time to talk
 - ♦ If not, offer a telephone appointment
 - Ask them for the name and number of a collateral contact in case the call is ended prematurely



Clients are no different than we are when it comes to receiving calls. They may see the call as an interruption and may be distracted and prefer a call back when it is more convenient for them to talk.

Some clients are fatigued by late afternoon so consider calling earlier. Clients with arthritis may need more time in the morning to complete their activities of daily living so consider calling them later in the morning. PRISM diagnosis data may be helpful for identifying the best times to contact the client.

- Ask the client to share their concerns and experiences using the Medicaid program and/or their medical providers
 - By identifying barriers you may be able to identify an opportunity to offer assistance through Health Home Services







- 4. Client Concerns continued:
 - Use this as an opportunity to explain how this program may:
 - · Help them gain better service
 - Improve their health
 - Ask them what they fear they may lose by participating
 - Ask them what they may gain by participating



By identifying their concerns about what they may lose you will identify some of the barriers to them accepting health home services.

- 5. Ask questions to elicit their concerns about their health
 - Explain how Health Home Services can help
- 6. After asking a few questions ask them if they have time to answer a few more questions





This will help you determine how much more time they have to talk.

This signals to the client that you are aware of their time and attention and value their time.

Take Time to Listen

The greatest compliment you can give a client is to listen

- · Do not call if you cannot devote the time
- Complete calls when you expect the fewest interruptions
- · Mix closed ended questions with open ended questions
- · Repeat back to the client to check for understanding



These are some tips on how you can improve your success.

If you have support staff completing the initial call consider allowing them to use a space where they will not be interrupted and can focus on the call. Sitting in reception and answering phones and greeting the public may not be the best place for staff to complete these calls.

Take Time to Listen

- · Probe the client to determine how they would like to receive information
 - Written communication
 - Follow-up call
 - Will the client agree to a face-to-face visit?
 - Who should be present at the visit?
 - Can you contact this person or persons to schedule a visit?
 - When asking questions to elicit personal information explain why they are being asked
 - Assure them that their answers will not result in a loss of benefits







How Clients Make Decisions

Some things to consider:

- Some clients base decisions on information
 - They may need more facts about the program
 - Consider sending written material
 - Refer them to the HCA or DSHS Web site
- Some clients depend on the guidance or opinions of others to make decisions
 - Explore with the client who they trust
 - Request permission to contact this person/s







You will note a common thread through this presentation which is to use every opportunity you can create to ask the client for a collateral contact in case you lose contact with the client. Working with collaterals may improve your chances for engaging the client in services.

First Contact



✓ If you speak with the client request alternate numbers where they can be reached

- Request information about collateral contacts and ask for verbal consent to contact when appropriate
- ✓ Document the verbal approval until you can complete a Information Sharing Consent form (HCA-22-852)









Now let's consider what you may want to do if to further engage the client.

Client Cooperation

- ✓ If the client remains hesitant to commit to a face-to-face visit
 - Assure them that they do not have to participate
 - √ Offer another telephone contact
 - √ Follow up with a letter
 - ✓ Ask if there is someone else you should contact









Summarize the conversation before ending the call.

Client Cooperation

- ✓ If the client agrees to a visit:
 - ✓ Repeat the date, time, and location
 - ✓ Offer to contact collaterals that he/she may want to be present
 - ✓ Ask for their e-mail address to send a confirmation
 - ✓ Ask if there is any further information they would like or questions
 - ✓ Provide your name and contact information
 - √ Thank them for their time
 - √ Follow up with an appointment letter
 - √ Ask if someone else should receive a copy
 - Call to confirm that the letter has been received and to provide a reminder of the appointment







Consider referring to the visit as an appointment to increase their commitment.

Tips for Improving Engagement

- · Listen to the client
 - Repeating questions may signal that you are not listening
- · Avoid interrupting or finishing their sentence
- Avoid talking too fast
 - There may be a language barrier or hearing impairment
- · Avoid interruptions and placing the client on hold
- Show your enthusiasm for the program and its benefits to this client









When we talk about outreach we also include broader outreach to promote the program so that partners in the community are aware of this new Medicaid benefit. Awareness of the program may increase the chance that they may want to contact you to complete a referral or to find out if their client is receiving health home services.

Outreach Includes Networking With the Community

- DSHS: local Community Services Offices, Home and Community Services, and Division of Developmental Disabilities
- Area Agencies on Aging
 - Aging and Disability Resource Centers (ADRC)
- Hospital and nursing facility discharge planners
- > A Teams, Community Resource Teams, or Elder Abuse Councils
- Law enforcement and corrections
- Mental Health and Chemical Dependency clinics and providers
- Community Health Centers and other clinics







Parting Thought

We describe this program as providing services that are the right care, at the right times, and the right places and encourage you to view your outreach as critical to the success of this new client benefit.







At the Two-Day Basic training we talked about this service as a mechanism for helping our clients access the right care, at the right times, and the right places. By being proactive and responding to referrals as quickly as possible you increase the likelihood that you will reach the client. These clients will benefit from your interactions. Do not under estimate the value you bring to our program and our clients.

Informational Web Sites

Health Care Authority:

http://www.hca.wa.gov/Pages/health_homes.aspx

DSHS Health Homes:

http://www.altsa.dshs.wa.gov/duals/



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For further information about Health Homes Services please visit these sites.

Need further information?

E-mail your questions to:

Health Care Authority: HealthHomes@HCA.wa.gov



Westerglan States Health Care Authority



To ask a question please contact the Health Care Authority. Your questions for DSHS will be forwarded from this mailbox.

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Certificate of Completion	
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